Case 17-36491 Doc 1 Filed 12/08/17 Entered 12/08/17 13:11:41 Desc Main Document Page 1 of 48

| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | rt 1: Identify Yourself | | | |
|-----|--|--|---|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Joseph First name C. Middle name | First name Middle name | |
| | Bring your picture identification to your meeting with the trustee. | Buras Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) | |
| 2. | All other names you hav | ve | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-9917 | | |

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Case number (if known)

Debtor 1 Joseph C. Buras

| | | About Debtor 1: | Ak | pout Debtor 2 (Spouse Only in a Joint Case): | | |
|---|---|---|--|---|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | | ■ I have not used any business name or EINs. Business name(s) | ☐ I have not used any business name or EINs. Business name(s) EINs | | | |
| | | EINs | EII | NS | | |
| 5. | Where you live | 685 Foxdale Court Roselle, IL 60172 | If I | Debtor 2 lives at a different address: | | |
| | | Number, Street, City, State & ZIP Code | Nu | umber, Street, City, State & ZIP Code | | |
| | | DuPage | | | | |
| | | County | Co | bunty | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | in | Debtor 2's mailing address is different from yours, fill it here. Note that the court will send any notices to this ailing address. | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Nu | umber, P.O. Box, Street, City, State & ZIP Code | | |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, | C# | | | |
| | | I have lived in this district longer than in any other district. | | have lived in this district longer than in any other district. | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |
| | | | | | | |

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Case number (if known) Debtor 1 Joseph C. Buras

| ar | Tell the Court About | Your B | ankruptcy Ca | se | | | | |
|-----|--|---|----------------|------------------------------------|---|--|------------------------------------|--|
| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | |
| | choosing to file under | ■ Chapter 7 | | | | | | |
| | | □ с | hapter 11 | | | | | |
| | | ☐ CI | hapter 12 | | | | | |
| | | □ CI | hapter 13 | | | | | |
| | | | | | | | | |
| 3. | How you will pay the fee | | about how yo | u may pay. Typ attorney is subr | ically, if you are paying the | se check with the clerk's office in ye fee yourself, you may pay with cour behalf, your attorney may pay | cash, cashier's check, or money | |
| | | | | | allments. If you choose the (Official Form 103A). | nis option, sign and attach the App | plication for Individuals to Pay | |
| | | | | | | s option only if you are filing for C nly if your income is less than 150 | | |
| | | | applies to you | ur family size an | d you are unable to pay th | ne fee in installments). If you chooded (Official Form 103B) and file it w | ose this option, you must fill out | |
| | | | | | | | | |
| Э. | Have you filed for bankruptcy within the | ■ No |). | | | | | |
| | last 8 years? | ☐ Ye | es. | | | | | |
| | | | District | | When | Case numb | er | |
| | | | District | | When | Case numb | | |
| | | | District | | When | Case numb | er | |
| 10. | Are any bankruptcy | ■ No |) | | | | | |
| | cases pending or being filed by a spouse who is | ☐ Ye | es. | | | | | |
| | not filing this case with you, or by a business partner, or by an affiliate? | | | | | | | |
| | | | Debtor | | | Relationship | to you | |
| | | | District | | When _ | Case numbe | r, if known | |
| | | | Debtor | | | Relationship | to you | |
| | | | District | - | When | Case numbe | r, if known | |
| 11. | Do you rent your residence? | ■ No | Go to I | ine 12. | | | | |
| | . Joing in the second of the s | ☐ Ye | es. Has yo | ur landlord obta | nined an eviction judgment | against you? | | |
| | | | | No. Go to line | 12. | | | |
| | | | | Yes. Fill out Initial | | viction Judgment Against You (Fo | orm 101A) and file it with this | |
| | | | | | | | | |

| Debtor 1 | Joseph C. Buras | Document | Page 4 of 48 | Case number (if known) | |
|----------|-----------------|----------|--------------|------------------------|--|
| | | | | | |

| Part | Report About Any Bu | sinesses | You Owr | n as a Sole Propriet | tor | | |
|---|---|--|--|--|---|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to Part 4. | | | | |
| | | ☐ Yes. | Name | e and location of bus | iness | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | Name of business, if any | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Number, Street, City, State & ZIP Code | | | | |
| it to this petition. Check the appropriate box to describe your business: | | | | x to describe your business: | | | |
| | | | | Health Care Busin | ness (as defined in 11 U.S.C. § 101(27A)) | | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | | Stockbroker (as d | efined in 11 U.S.C. § 101(53A)) | | |
| ☐ Commodity Broker (as defined in 11 U.S.C. § 101 | | | | r (as defined in 11 U.S.C. § 101(6)) | | | |
| | | | | None of the above | | | |
| 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set a deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, st operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the in 11 U.S.C. 1116(1)(B). | | a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure | | | | | |
| | For a definition of small | No. | Iamı | not filing under Chap | oter 11. | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | |
| | | ☐ Yes. | I am i | filing under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | |
| Pari | 4: Report if You Own or | Have Anv | Hazardo | ous Property or An | y Property That Needs Immediate Attention | | |
| | Do you own or have any | | | | · · | | |
| | property that poses or is alleged to pose a threat of imminent and | ■ No. □ Yes. | What is | the hazard? | | | |
| | identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? | | | diate attention is why is it needed? | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where i | s the property? | Number, Street, City, State & Zip Code | | |
| | | | | | Number, Street, City, State & Zip Code | | |

Debtor 1 Joseph C. Buras

Document Page 5 of 48

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Deb | tor 1 Joseph C. Buras | | Document | — Paye 0 01 40 | Case number (if I | known) | | |
|------|--|----------------------|--|--|----------------------|--|--|--|
| Part | 6: Answer These Questi | ons for R | eporting Purposes | | | | | |
| 16. | What kind of debts do you have? | 16a. | Are your debts primarily cons individual primarily for a personal | | | in 11 U.S.C. § 101(8) as "incurred by an | | |
| | | | □ No. Go to line 16b. | | | | | |
| | | | Yes. Go to line 17. | | | | | |
| | | 16b. | Are your debts primarily busing money for a business or investment | | | | | |
| | | | ☐ No. Go to line 16c. | | | | | |
| | | | ☐ Yes. Go to line 17. | | | | | |
| | | 16c. | State the type of debts you owe | that are not consumer de | ebts or business de | ebts | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter 7. | Go to line 18. | | | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | are paid that funds will be availa | | | is excluded and administrative expenses | | |
| | administrative expenses are paid that funds will | | No | | | | | |
| | be available for distribution to unsecured creditors? | | ☐ Yes | | | | | |
| 18. | How many Creditors do | 1 -49 | | 1 ,000-5,000 | | □ 25,001-50,000 | | |
| | you estimate that you owe? | 50-99 | | ☐ 5001-10,000 ☐ 10,001-25,000 | | ☐ 50,001-100,000 ☐ More than100,000 | | |
| | | ☐ 100-1 ☐ 200-9 | | 1 0,001-25,000 | | in More than 100,000 | | |
| 19. | How much do you | \$0 - \$ | 50,000 | □ \$1,000,001 - \$10 i | million | ☐ \$500,000,001 - \$1 billion | | |
| | estimate your assets to be worth? | | 01 - \$100,000 | □ \$10,000,001 - \$50 | | □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion | | |
| | | | 001 - \$500,000 001 - \$1 million | □ \$50,000,001 - \$10 □ \$100,000,001 - \$5 | | ☐ More than \$50 billion | | |
| 20. | How much do you | \$0 - \$ | 50,000 | 1 \$1,000,001 - \$10 | million | □ \$500,000,001 - \$1 billion | | |
| | estimate your liabilities to be? | _ | 001 - \$100,000 | □ \$10,000,001 - \$50 □ \$50,000,001 - \$10 | | □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion | | |
| | | | 001 - \$500,000 001 - \$1 million | □ \$50,000,001 - \$10 □ \$100,000,001 - \$5 | | ☐ More than \$50 billion | | |
| | | — \$500, | | | | · | | |
| Part | 5 | | | | | | | |
| For | you | I have ex | amined this petition, and I declare | e under penalty of perjury | that the information | on provided is true and correct. | | |
| | | | chosen to file under Chapter 7, I a tates Code. I understand the relie | | | der Chapter 7, 11,12, or 13 of title 11, e to proceed under Chapter 7. | | |
| | | | rney represents me and I did not put, I have obtained and read the no | | | attorney to help me fill out this | | |
| | | I request | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | | |
| | | bankrupt and 3571 | cy case can result in fines up to \$ | | | operty by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519, | | |
| | | Joseph | ph C. Buras C. Buras e of Debtor 1 | Sign | ature of Debtor 2 | | | |
| | | Executed | December 7, 2017 | Exec | cuted on | D/YYYY | | |

Debtor 1 Joseph C. Buras

Document Page 7 of 48

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Gregory J. Martucci | Date | December 7, 2017 |
|---|---------------|------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Gregory J. Martucci 6185842 | | |
| Law Office of Gregory J. Martucci, P.C. | | |
| 203 E. Irving Park Rd. Roselle, IL 60172 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone | Email address | |
| 6185842 | | |
| Bar number & State | | |

| | | Docume | ent Page 8 of 48 | |
|---------------------|-------------------------|-------------------|------------------|-----------------------|
| Fill in this inform | mation to identify your | case: | | |
| Debtor 1 | Joseph C. Buras | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number _ | | | | ☐ Check if this is an |
| | | | | amended filing |
| | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | 1: Summarize Your Assets | | |
|-----|---|--------------|-------------------------|
| | | Your as | ssets f what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 19,968.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 19,968.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | abilities : you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 19,000.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 17,856.00 |
| | Your total liabilities | \$ | 36,856.00 |
| Par | 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,623.56 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 1,612.68 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sch | edules. |
| 7. | Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | a personal, | family, or |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11: OR . Form 122B Line 11: OR . Form 122C-1 Line 14. |

0.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Total claim | |
|--|-------------|------|
| 1 Tolli 1 alt 4 on Schedule Lif, copy the following. | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| Official Form 106A/B Schedule A/B: Property neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category with the fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correctionmation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if kn inswer every question. Port 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own or have any legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own or have any legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own or have any legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own or have any legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own or have any legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own or have any legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own or have any legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own or have any legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own legal or equitable interest in any vehicles, and under the care of the legal or equitable interest in any vehicles, and | _ | | case and this filing: | | | |
|--|--|---|---|--|-------------------------------|---|
| Debtor 2 [Spouse, filling] First Name | F | | | | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | | irst Name | Middle Name | Last Name | | |
| Case number Check it amende Check it this is community property | | irst Name | Middle Name | Last Name | | |
| Difficial Form 106A/B Schedule A/B: Property neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category with the first best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correctormation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if kn inswer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own or the description of the property? Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No. Yes. Who has an interest in the property? Check one Model: RAV 4 Year: Z015 Approximate milesage: 7500 Other information: Debtor 1 only Debtor 2 only Approximate milesage: 7500 Other information: Check if this is community property \$18,000.00 \$1 | l States Bankru | ptcy Court for the: | NORTHERN DISTRICT C | OF ILLINOIS | | |
| Difficial Form 106A/B Schedule A/B: Property neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category with the first best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correctormation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if kn inswer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own or the description of the property? Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No. Yes. Who has an interest in the property? Check one Model: RAV 4 Year: Z015 Approximate milesage: 7500 Other information: Debtor 1 only Debtor 2 only Approximate milesage: 7500 Other information: Check if this is community property \$18,000.00 \$1 | numbor | - | | | | |
| Schedule A/B: Property neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category whink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct first best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if kn inswer every question.) Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Do you own or have any legal or equitable interest in any residence, building, land, or similar property? I No. Go to Part 2. Describe Your Vehicles Do syou own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own one one else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes: Do not deduct secured claims or exemplify the amount of any secured cla | number | | | | | Check if this is an amended filing |
| Schedule A/B: Property neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category whink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct first best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct first best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct first best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct first best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct first best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct first best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct first best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct first best between the possible. If the asset in the property? Do you own or have any legal or equitable interest in any residence, building, land, or similar property? Do you own, lease, or have legal or equitable interest in any residence, building, land, or similar property? Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own. Include any vehicles y | | | | | | - |
| Schedule A/B: Property neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category whink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct first best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct first best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct first best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct first best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct first best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct first best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct first best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct first best between the possible. If the asset in the property? Do you own or have any legal or equitable interest in any residence, building, land, or similar property? Do you own, lease, or have legal or equitable interest in any residence, building, land, or similar property? Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own. Include any vehicles y | cial Form | 106A/B | | | | |
| neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category whink it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct filling together, both are equally responsible for supplying correct filling together, both are equally responsible for supplying correct filling together, both are equally responsible for supplying correct filling together, both are equally responsible for supplying correct filling together, both are equally responsible for supplying correct filling together, both are equally responsible for supplying correct filling together, both are equally responsible for supplying correct filling together, both are equally responsible for supplying correct filling together, both are equally responsible for supplying correct filling together, both are equally responsible for supplying correct filling together, both are equally responsible for supplying correct equally responsible for supplying correct filling together, both are equally responsible for supplying correct filling together, both are equally responsible for supplying correct filling together, both are equally responsible for supplying correct filling together, both are equally responsible for supplying correct filling together, both are equally responsible for supplying correct filling together, both are equally responsible for supplying correct filling together, both and accurate as equally responsible for supplying correct filling together, both and an interest in the top of any additional pages, write your name and case number (if kn inswers to any additional pages, write your name and case number (if kn inswers equally responsible for supplying correct filling together, both are equally responsible for supplying correct filling together, both are equally responsible for supplying correct file filling the property? Does or Part 2: | | | ertv | | | 12/15 |
| No. Go to Part 2. Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own you own you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own you have legal or equitable interest in the property? Check one the amount of any secured claims or exempting the amount of any secured claims or exempting have a legal or equitable interest in the property? Check one the amount of any secured claims or exempting have a legal or equitable interest in the property? Check one the amount of any secured claims or exempting have a legal or equitable interest in the property? Check one the amount of any secured claims or exempting have a legal or equitable interest in the property? Check one the amount of any secured claims or exempting have a legal or equitable interest in the property? Check one the amount of any secured claims or exempting have a legal or equitable interest in the property? Check one the amount of any secured claims or exempting have a legal or equitable interest in the property? Check one the amount of any secured claims or exempting have a legal or equitable interest in the property? Check one the amount of any secured claims or exempting have a legal or equitable interest in the property? Check one the amount of any secured claims or exempting have a legal or equita | category, separa fits best. Be as ation. If more spa | ately list and describe complete and accurate ice is needed, attach a | e items. List an asset only or e as possible. If two married | l people are filing together, bot | h are equally responsible for | supplying correct |
| No. Go to Part 2. Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you ow someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 3.1 Make: Toyota | Describe Each | Residence, Building, | Land, or Other Real Estate | You Own or Have an Interest In | 1 | |
| Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own comeone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 3.1 Make: Toyota | ou own or have | any legal or equitable | interest in any residence, b | uilding, land, or similar propert | ty? | |
| Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own comeone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 3.1 Make: Toyota | o. Go to Part 2. | | | | | |
| Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own | | property? | | | | |
| Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own comeone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes | • | | | | | |
| Someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3.1 Make: Toyota Who has an interest in the property? Check one Model: RAV 4 Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Current value of the entire property? Check one of the debtors and another Leased Vehicle | Describe Your | venicies | | | | |
| Model: RAV 4 Year: 2015 Approximate mileage: 7500 Other information: Leased Vehicle Who has an interest in the property? Check one the amount of any secured claims on Scl. Creditors Who Have Claims Secured by Current value of the entire property? Standard Therest in the property? Check one the amount of any secured claims on Scl. Creditors Who Have Claims Secured by Current value of the entire property? Current value of the entire property? Standard Therest in the property? Check one the amount of any secured claims on Scl. Creditors Who Have Claims Secured by Current value of the entire property? Standard Therest in the property? Check one the amount of any secured claims on Scl. Creditors Who Have Claims Secured by Current value of the entire property? Standard Therest in the property? Check one the amount of any secured claims on Scl. Creditors Who Have Claims Secured by Current value of the entire property? Standard Therest in the property? | ne else drives. I s, vans, trucks lo | If you lease a vehicle | e, also report it on <i>Schedul</i> | le G: Executory Contracts and | | · |
| Model: RAV 4 Year: 2015 Approximate mileage: 7500 Other information: Leased Vehicle Who has an interest in the property? Check one the amount of any secured claims on Scl. Creditors Who Have Claims Secured by Carrent value of the entire property? Current value of the entire property? Standard Therest in the property? Check one the amount of any secured claims on Scl. Creditors Who Have Claims Secured by Scl. | _ | | | | Do not doduct socuros | I claims or exemptions. But |
| Year: 2015 Approximate mileage: 7500 Other information: Leased Vehicle Current value of the entire property? Current value of the entire property? Current value of the entire property? State of this is community property (see instructions) Current value of the entire property? State of this is current value of the entire property? State of this is current value of the entire property? State of this is current value of the entire property? State of this is current value of the entire property? State of this is current value of the entire property? State of this is current value of the entire property? State of this is current value of the entire property? State of this is current value of the entire property? State of this is current value of the entire property? State of this is current value of the entire property? State of this is current value of the entire property? State of this is current value of the entire property? State of this is current value of the entire property? State of this is current value of the entire property? State of this is current value of the entire property? State of this is current value of the entire property? | DAV | | | st in the property? Check one | the amount of any sec | ured claims on Schedule D: |
| Approximate mileage: 7500 Other information: Leased Vehicle Check if this is community property (see instructions) Current value of the entire property? Portion you current value of the entire property? Portion you current value of the entire property? Standard Poblem 1 and Debtor 2 only Other information: Current value of the entire property? Portion you current value of the entire property? Standard Poblem 1 and Debtor 2 only Other information: Check if this is community property (see instructions) | | | | | Creditors Who Have C | laims Secured by Property. |
| Other information: Leased Vehicle Check if this is community property (see instructions) At least one of the debtors and another \$18,000.00 \$1 | | | · - | ahtar 2 anlı | | Current value of the |
| Leased Vehicle Check if this is community property (see instructions) \$18,000.00 \$1 | • • | | | • | chare property: | portion you own: |
| (see instructions) | Leased Vehi | cle | | ne debiors and another | * | |
| Wetanant singet water home. ATVs and other requestional value into a other values and accessories | | | I | community property | \$18,000.00 | \$18,000.00 |
| Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No Yes Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here | <i>mples:</i> Boats, tra lo | ailers, motors, person | nal watercraft, fishing vess ou own for all of your en | sels, snowmobiles, motorcycle tries from Part 2, including | e accessories any entries for | \$18,000.00 |
| portion you o | ges you have a | Personal and Housel | hold Items | | | Current value of the portion you own? Do not deduct secured |

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

| Debtor 1 | Joseph C. Buras Document Page 11 of 48 Case number (if known) | Desc Main |
|--|---|---|
| ■ Yes. | Describe | |
| | Furniture | \$200.00 |
| □ No | ics es: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music coincluding cell phones, cameras, media players, games Describe | ollections; electronic devices |
| | Television | \$100.00 |
| Examp ■ No | bles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, other collections, memorabilia, collectibles Describe | or baseball card collections; |
| Examp. No | ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes a musical instruments Describe | and kayaks; carpentry tools; |
| 10. Firear ı <i>Exam</i> ■ No | | |
| □ No | s soles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe | |
| | Used Clothing | \$300.00 |
| ■ No □ Yes. 13. Non-fa | y ples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, go Describe rm animals ples: Dogs, cats, birds, horses | old, silver |
| ■ No | Describe | |
| ■ No | her personal and household items you did not already list, including any health aids you did not list Give specific information | |
| | he dollar value of all of your entries from Part 3, including any entries for pages you have attached art 3. Write that number here | \$600.00 |
| Part 4: De | scribe Your Financial Assets | |
| Do you ov | n or have any legal or equitable interest in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |

Official Form 106A/B Schedule A/B: Property page 2

| | | Case 17- | 36491 | Doc 1 | Filed 12/08/17 Document | Entered 12/08/17 13:11:41 Page 12 of 48 | Desc Main |
|-----|--------------------------|---------------------------------------|--|--------------------------------|--|---|--------------------------------|
| De | ebtor 1 | Joseph C. E | Buras | | Document | Case number (if known) | |
| | ■ No | | · | | our home, in a safe dep | osit box, and on hand when you file your petiti | on |
| | | | | | al accounts; certificates counts with the same ins | of deposit; shares in credit unions, brokerage h stitution, list each. | nouses, and other similar |
| | | | | | Institution i | name: | |
| | _ 100 | | 17.1. | Checking | BMO Har Roselle, l #5531 | | \$50.00 |
| | | | | | #3331 | | |
| | Examp ■ No □ Yes | | , investmer | nt accounts wi | ith brokerage firms, mon | ney market accounts orporated businesses, including an interes | st in an LLC, partnership, and |
| | joint v | enture | | | | | |
| | ■ No □ Yes. | Give specific in | | bout them e of entity: | | % of ownership: | |
| | Negoti Non-ne ■ No | iable instrument: | s include pe nents are the ormation at | ersonal check nose you canr | s, cashiers' checks, pro | egotiable instruments missory notes, and money orders. by signing or delivering them. | |
| 21. | Examp | ment or pension ples: Interests in | | | 1(k), 403(b), thrift saving | gs accounts, or other pension or profit-sharing | plans |
| | ■ No □ Yes. | List each accou | | ly. account: | Institution i | name: | |
| 22. | Your s | | ed deposits | you have ma | | ntinue service or use from a company ctric, gas, water), telecommunications compar | nies, or others |
| | _ | | | | Institution i | name or individual: | |
| 23. | Annuit ■ No | ies (A contract f | or a periodi | c payment of | money to you, either fo | r life or for a number of years) | |
| | Yes | ls | ssuer name | and descripti | ion. | | |
| 24. | 26 U.S. | ts in an educati C. §§ 530(b)(1), | | | in a qualified ABLE pro | ogram, or under a qualified state tuition pro | ogram. |
| | ■ No □ Yes | lr | nstitution na | ime and desc | cription. Separately file t | he records of any interests.11 U.S.C. § 521(c): | : |
| 25. | Trusts | , equitable or fu | ıture intere | ests in prope | rty (other than anythir | ng listed in line 1), and rights or powers exe | ercisable for your benefit |
| | _ | Give specific in | formation a | bout them | | | |
| 26. | | | | | ets, and other intellector roceeds from royalties a | ual property and licensing agreements | |

Official Form 106A/B Schedule A/B: Property page 3

☐ Yes. Give specific information about them...

| Debtor 1 | Joseph C. Buras | Document | Page 13 of 48 Case number (if known) | |
|--------------|---|----------------------------|--|---|
| Exan | ses, franchises, and other general into | s, cooperative association | on holdings, liquor licenses, professional licens | ses |
| Money o | r property owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No | efunds owed to you s. Give specific information about them, ir | ncluding whether you alr | eady filed the returns and the tax years | |
| Exan ■ No | ly support nples: Past due or lump sum alimony, spo | ousal support, child supp | port, maintenance, divorce settlement, propert | y settlement |
| Exan | r amounts someone owes you nples: Unpaid wages, disability insurance benefits; unpaid loans you made to s. Give specific information | | nefits, sick pay, vacation pay, workers' compe | ensation, Social Security |
| | ests in insurance policies nples: Health, disability, or life insurance; | health savings account | (HSA); credit, homeowner's, or renter's insura | nce |
| | s. Name the insurance company of each Company name: | | Beneficiary: | Surrender or refund value: |
| | Jackson Natio P.O. Box 1450 Jacksonville, | | Son - Tom Drager | \$1,318.00 |
| If you some | nterest in property that is due you from a are the beneficiary of a living trust, experience has died. S. Give specific information | | ied nsurance policy, or are currently entitled to rec | ceive property because |
| Exan | ns against third parties, whether or not imples: Accidents, employment disputes, in the control of the control | | | |
| ■ No | contingent and unliquidated claims of the contingent and unliquidated claims. | of every nature, includi | ng counterclaims of the debtor and rights t | o set off claims |
| ■ No | inancial assets you did not already list | t | | |
| | I the dollar value of all of your entries f Part 4. Write that number here | | any entries for pages you have attached | \$1,368.00 |
| Part 5: D | escribe Any Business-Related Property Yo | u Own or Have an Interes | t In. List any real estate in Part 1. | |

Official Form 106A/B Schedule A/B: Property page 4

Case 17-36491 Doc 1 Filed 12/08/17 Entered 12/08/17 13:11:41 Desc Main Page 14 of 48

Case number (if known) Document Debtor 1 Joseph C. Buras 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$18,000.00 57. Part 3: Total personal and household items, line 15 \$600.00 Part 4: Total financial assets, line 36 58. \$1,368.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$19,968.00 \$19,968.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$19,968.00

| | | | 111 FAUE 13 01 40 | |
|---------------------|--------------------------|-------------------|-------------------|------------------------------------|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Joseph C. Buras | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | Check if this is an |
| (II KIIOWII) | | | | Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Specific laws that allow exemption Check only one box for each exemption. |
|---|--|---|
| Furniture Line from Schedule A/B: 6.1 | \$200.00 | \$200.00 735 ILCS 5/12-1001(b) 100% of fair market value, up to any applicable statutory limit |
| Television Line from <i>Schedule A/B</i> : 7.1 | \$100.00 | \$100.00 735 ILCS 5/12-1001(b) 100% of fair market value, up to any applicable statutory limit |
| Used Clothing Line from Schedule A/B: 11.1 | \$300.00 | \$300.00 735 ILCS 5/12-1001(a) 100% of fair market value, up to any applicable statutory limit |
| Checking: BMO Harris Bank Roselle, IL #5531 Line from Schedule A/B: 17.1 | \$50.00 | \$50.00 735 ILCS 5/12-1001(b) 100% of fair market value, up to any applicable statutory limit |
| Jackson National Life Insurance P.O. Box 1450 Jacksonville, IL 62651 Beneficiary: Son - Tom Drager Line from Schedule A/B: 31.1 | \$1,318.00 | \$1,318.00 735 ILCS 5/12-1001(b) 100% of fair market value, up to any applicable statutory limit |

Case 17-36491 Doc 1 Filed 12/08/17 Entered 12/08/17 13:11:41 Desc Main

Debtor 1 Joseph C. Buras

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

| Case 17-36491 | | Entered 12/ | 08/17 13:11:4 8 | 41 Desc M | lain | | |
|---|---|------------------------|---------------------|---|-----------------------------|--|--|
| Fill in this information to identify you | | | | | | | |
| Debtor 1 Joseph C. Bura | s | | | | | | |
| First Name | | st Name | | | | | |
| Debtor 2 (Spouse if, filing) First Name | Middle Name Las | st Name | | | | | |
| United States Bankruptcy Court for the | NORTHERN DISTRICT OF ILLINO | ols | | | | | |
| Case number (if known) | | | | _ | if this is an led filing | | |
| <u> Official Form 106D</u> Schedule D: Creditors | Who Have Claims Se | cured by | Property | | 12/15 | | |
| | If two married people are filing together, bout, number the entries, and attach it to th | | | | | | |
| 1. Do any creditors have claims secured by | y your property? | | | | | | |
| ☐ No. Check this box and submit t | his form to the court with your other sch | edules. You have | nothing else to rep | ort on this form. | | | |
| ■ Yes. Fill in all of the information | | | | | | | |
| Part 1: List All Secured Claims | bolow. | | | | | | |
| | | . , Colu | mn A Coi | lumn B | Column C | | |
| | more than one secured claim, list the creditor s a particular claim, list the other creditors in F ical order according to the creditor's name. | Part 2. As Amo Do n | | ue of collateral t supports this im | Unsecured portion If any | | |
| 2.1 Toyota Financial Services | Describe the property that secures the c | | 19,000.00 | \$18,000.00 | \$1,000.00 | | |
| Creditor's Name | 2015 Toyota RAV 4 7500 miles Leased Vehicle | | | | | | |
| P.O. Box 5855 Carol Stream, IL 60197 | As of the date you file, the claim is: Check apply. Contingent | k all that | | | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | | | | |
| | ☐ Disputed | | | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | | | |
| Debtor 1 only | An agreement you made (such as morto car loan) | gage or secured | | | | | |
| Debtor 2 only | _ ′ | | | | | | |
| _ | or 1 and Debtor 2 only | | | | | | |
| | east one of the debtors and another Judgment lien from a lawsuit | | | | | | |
| ☐ Check if this claim relates to a community debt | ☐ Judgment lien from a lawsuit | ased Vehicle | | | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$19,000.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$19,000.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | Case 11-30431 L | Document | Page 18 of 48 | +1 Des | oc iviairi |
|--|---|--|---|----------------|---------------------------|
| Fill in this in | nformation to identify your | | | | |
| Debtor 1 | Joseph C. Buras | | | | |
| DODIO! ! | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States | s Bankruptcy Court for the: | NORTHERN DISTRICT OF ILL | INOIS | | |
| Case numbe | ır | | | | |
| (if known) | · | | | □ C | heck if this is an |
| | | | | а | mended filing |
| Official F | orm 106E/F | | | | |
| | | ho Have Unsecured | Claims | | 12/15 |
| | | | Y claims and Part 2 for creditors with NONP | PIODITY clai | |
| Schedule D: C left. Attach the name and case | reditors Who Have Claims Sec e Continuation Page to this pag e number (if known). | ured by Property. If more space is r e. If you have no information to rep | o not include any creditors with partially se needed, copy the Part you need, fill it out, n port in a Part, do not file that Part. On the to | umber the ent | tries in the boxes on the |
| | st All of Your PRIORITY Un | | | | |
| _ ′ | editors have priority unsecure | d claims against you? | | | |
| _ | to Part 2. | | | | |
| ☐ Yes. | | | | | |
| | st All of Your NONPRIORIT | | | | |
| 3. Do any cr | editors have nonpriority unsec | ured claims against you? | | | |
| ☐ No. Yo | ou have nothing to report in this pa | art. Submit this form to the court with | your other schedules. | | |
| Yes. | | | | | |
| 4. List all of | your nonpriority unsecured cla | aims in the alphabetical order of the | e creditor who holds each claim. If a creditor | r has more tha | n one nonpriority |
| unsecured than one o | d claim, list the creditor separately | for each claim. For each claim listed | , identify what type of claim it is. Do not list clain have more than three nonpriority unsecured cla | ms already inc | luded in Part 1. If more |
| Part 2. | | | | | Total claim |
| | | | | | |
| | erican Express riority Creditor's Name | Last 4 digits of acc | ount number | | \$926.00 |
| | . Box 0001 | When was the debt | incurred? | | _ |
| | Angeles, CA 90096 | As of the date were | | | |
| | ber Street City State Zlp Code incurred the debt? Check one. | As of the date you f | file, the claim is: Check all that apply | | |
| _ | ebtor 1 only | ☐ Contingent | | | |
| _ | ebtor 2 only | ☐ Unliquidated | | | |
| _ | ebtor 2 only ebtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | t least one of the debtors and and | _ ' | ITY unsecured claim: | | |
| | t least one of the debtors and and heck if this claim is for a comr | | | | |
| debt | | | ng out of a separation agreement or divorce that | t you did not | |
| Is the | e claim subject to offset? | report as priority clair | ms | | |
| ■ N | 0 | • | or profit-sharing plans, and other similar debts | | |
| ☐ Y | es | Other. Specify | Credit Card Purchases | | |

Best Case Bankruptcy

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Debtor 1 Joseph C. Buras Case number (if know) 4.2 \$6,960.00 Barclays Bank/Juniper Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 8803 When was the debt incurred? Wilmington, DE 19899 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes 4.3 **Bloomingdale Fire Protection** Last 4 digits of account number \$63.00 Nonpriority Creditor's Name When was the debt incurred? District No. 1 P.O. Box 457 Wheeling, IL 60090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Ambulance Fee ☐ Yes 4.4 **BMO Harris Bank** \$2,992.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 94304 Palatine, IL 60094 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card Purchases ☐ Yes

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Debtor 1 Joseph C. Buras Case number (if know) 4.5 \$1,073.00 **Capital One Bank** Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 30281 When was the debt incurred? Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes 4.6 **Credit One Bank** Last 4 digits of account number \$384.00 Nonpriority Creditor's Name When was the debt incurred? P.O. Box 98873 Las Vegas, NV 89193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card Purchases** Other. Specify 4.7 Dependon Collection Services, Inc. Last 4 digits of account number \$0.00 Nonpriority Creditor's Name When was the debt incurred? P.O. Box 4983 Oak Brook, IL 60522 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other Specify Collector for Suburban Radiologists

☐ Yes

Case 17-36491 Doc 1 Filed 12/08/17 Entered 12/08/17 13:11:41 Desc Main Document Page 21_of 48 Debtor 1 Joseph C. Buras Case number (if know) 4.8 \$22.00 Dr. Eniokova Last 4 digits of account number Nonpriority Creditor's Name In Patient Consult of Illinois When was the debt incurred? P.O. Box 844918 Los Angeles, CA 90084 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No **Medical Bill** ☐ Yes Other. Specify 4.9 Dr. Hameduddin Last 4 digits of account number \$11.00 Nonpriority Creditor's Name When was the debt incurred? **Northwest Suburban Medical** 3150 W. Higgins Rd., Ste. 130 Hoffman Estates, IL 60169 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Bill** Other. Specify Dr. Komonick **Various** \$16.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Center for Sports Orthopaedic 1585 Barrington Rd., Ste. 101 Hoffman Estates, IL 60169 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bill ☐ Yes

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| 4.1 | Dr. Tajuddin | Last 4 digits of account number | \$15.00 |
|-----|--|---|---|
| | Nonpriority Creditor's Name Northwest Oncology & Hematology 3701 Algonquin Rd., Ste. 900 | When was the debt incurred? | |
| | Rolling Meadows, IL 60008 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Medical Bill | |
| 4.1 | Figis | Last 4 digits of account number | \$33.00 |
| 2 | Nonpriority Creditor's Name | Last 4 digits of account number | Ψ00.00 |
| | P.O. Box 77001 | When was the debt incurred? | |
| | Madison, WI 53707 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | As of the date you me, the diam is. Oneok an that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Credit Card Purchases | |
| 4.1 | Lending Club Corporation | Last 4 digits of account number | \$5,233.00 |
| | Nonpriority Creditor's Name | | , , , , , , , , , , , , , , , , , , , |
| | 12 Stevenson, Ste. 300 | When was the debt incurred? | |
| | San Francisco, CA 94105 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | , | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify Loan | |

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|----------|---|--|----------|
| Debto | Joseph C. Buras | Document Page 23 of 48 Case number (if know) | |
| 4.1 | | | |
| 4.1 | NCI, Inc. | Last 4 digits of account number | \$0.00 |
| | Nonpriority Creditor's Name 3601 Algonquin Road, Ste. 232 Rolling Meadows, IL 60008 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | □ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Collector for Bloomingdale Fire Protection | |
| 4.1 5 | Radiological Consultants of Woodsto | Last 4 digits of account number | \$9.00 |
| | Nonpriority Creditor's Name 9410 Compubill Drive Orland Park, IL 60462 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Medical Bill | |
| 4.1 | Suburban Radiologists S.C. | Last 4 digits of account number | \$119.00 |
| | Nonpriority Creditor's Name 1446 Momentum Place Chicago, IL 60689 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | <u> </u> | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

■ Other. Specify Medical Bill

 \square Obligations arising out of a separation agreement or divorce that you did not

 \square Debts to pension or profit-sharing plans, and other similar debts

debt

■ No

☐ Yes

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Joseph C. Buras

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | • | Total Claim |
|-----------------------|-----|---|-----|----|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | 01 | On the other con- | 01 | | Total Claim |
| Total | 6f. | Student loans | 6f. | \$ | 0.00 |
| claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 17,856.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 17,856.00 |

| | | 170.611111 | 111 FAUE 7.3 01 40 | |
|---|--------------------------|-------------------|--------------------|-----------------|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Joseph C. Buras | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | ☐ Check if this |
| (ii. iii.ii.i) | | | | omended filin |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Р | erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|-----|--|--|
| 2.1 | GC Realty & Development, LLC 796 W. Bartlett Rd. Bartlett, IL 60103 | Residential lease for 685 Foxdale Ct., Roselle, IL 60172 |
| 2.2 | Toyota Financial Services P.O. Box 5855 Carol Stream, IL 60197 | 2015 Toyota RAV 4 lease through 7/2018 |

| | | Document | Page 26 of | 48 | |
|--|--|--|--|--|--|
| Fill in thi | s information to identify your o | case: | | | |
| Debtor 1 | Joseph C. Buras | | | | |
| Debtor 2 | First Name | Middle Name | Last Name | | |
| (Spouse if, fi | ling) First Name | Middle Name | Last Name | | |
| United St | ates Bankruptcy Court for the: | NORTHERN DISTRICT OF ILL | LINOIS | | |
| Case nun | nber | | | | ☐ Check if this is an amended filing |
| | al Form 106H <mark>dule H: Your Cod</mark> e | ebtors | | | 12/15 |
| people are ill it out, a our nam | e filing together, both are equa and number the entries in the e and case number (if known). | boxes on the left. Attach the A . Answer every question. | correct informatior dditional Page to t | n. If more space is n his page. On the to | ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write |
| 1. Do | you have any codebtors? (If y | ou are filing a joint case, do not | list either spouse as | a codebtor. | |
| □ No |) | | | | |
| ■ Ye | s | | | | |
| | | lived in a community property Nevada, New Mexico, Puerto Ri | | | |
| ■ No | o. Go to line 3. | | | | |
| | | use, or legal equivalent live with y | ou at the time? | | |
| in lin Form | e 2 again as a codebtor only if | f that person is a guarantor or | cosigner. Make su | re you have listed th | g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fil |
| | Column 1: Your codebtor Name, Number, Street, City, State and ZIF | P Code | | Column 2: The cre Check all schedule | editor to whom you owe the debt es that apply: |
| 3.1 | Tom Drager 685 Foxdale Ct. Roselle, IL 60172 Co-debtor/tenant, resident LLC | tial lease with GC Realty & | Development, | ☐ Schedule D, li☐ Schedule E/F☐ Schedule G☐ | , line |

Schedule H: Your Codebtors

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| | | | | | | • | | | | |
|--------------------|---|-------------------------------|---|-----------------------|---------------|----------------------|-------------------------------|-------------------------|--------------------------------|-----------------|
| Fill | in this information to identify your ca | ase: | | | | | | | | |
| Del | otor 1 Joseph C. B | uras | | | _ | | | | | |
| | otor 2 ouse, if filing) | | | | _ | | | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | | _ | | | | | |
| | se number | | | | | □ A | | d filing ent showi | ng postpetition | |
| 0 | fficial Form 106I | | | | | _ | | | following date: | |
| | chedule I: Your Inc | omo | | | | IV | 1M / DD/ Y | YYY | | 12/15 |
| sup spo atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. | are married and not filing wi | ng jointly, and your sith you, do not inclu | spouse i de inforr | s liv nati | ing with on about | you, incl your spo | ude infoi ouse. If n | rmation about nore space is | your needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | | Debtor 2 or non-filing spouse | | | |
| | If you have more than one job, attach a separate page with information about additional | Employment status | ☐ Employed | | | ☐ Employed | | | | |
| | | Employment status | ■ Not employed | Not employed | | | ☐ Not employed | | | |
| | employers. | Occupation | Retired | | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | | | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | | | | | | | |
| | | How long employed to | here? | | | | | | | |
| Par | t 2: Give Details About Mor | nthly Income | | | | | | | | |
| | mate monthly income as of the dause unless you are separated. | ate you file this form. If | you have nothing to re | eport for | any | line, write | e \$0 in the | space. Ir | nclude your no | n-filing |
| - | u or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the information | n for all e | mpl | oyers for | that perso | n on the | lines below. If | you need |
| | | | | | | For Del | otor 1 | | ebtor 2 or lling spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, or | • | | 2. | \$ | | 0.00 | \$ | N/A | |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. Add lin | ne 2 + line 3. | | 4. | \$ | | 0.00 | \$_ | N/A | |

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| Deb | tor 1 | Joseph C. Buras | _ | C | Case number (if k | (nown) | | | | |
|-----|---------------|--|----------|----|-------------------|--------------|-----------|--------------------------|---------------------|------------------|
| | | | | | | | | | _ | |
| | | | | | For Debtor 1 | | | or Debtor on-filing s | | |
| | Сор | y line 4 here | 4. | | \$ | 0.00 | \$ | II-IIIIII S | N/A | |
| 5. | l ist | all payroll deductions: | | | | | _ | | | _ |
| ٥. | 5a. | Tax, Medicare, and Social Security deductions | 5a. | | \$ | 0 00 | Ф | | NI/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | | | 0.00 0.00 | \$_ \$ | | N/A N/A | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | : | 0.00 | \$ | | N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 5d | | · | 0.00 | \$ | | N/A | _ |
| | 5e. | Insurance | 5e. | | | 0.00 | \$ | | N/A | _ |
| | 5f. | Domestic support obligations | 5f. | | \$ | 0.00 | \$ | | N/A | _ |
| | 5g. | Union dues | 5g. | | \$ | 0.00 | \$ | | N/A | _ |
| | 5h. | Other deductions. Specify: | 5h. | .+ | \$ | 0.00 | + \$ | | N/A | _ |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$ | 0.00 | \$_ | | N/A | _ |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ | 0.00 | \$_ | | N/A | _ |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | 0.0 | | o | 0.00 | ¢. | | N/A | |
| | ٥L | monthly net income. | 8a. | | | 0.00 | \$ \$ | | N/A | |
| | 8b. 8c. | Interest and dividends Family support payments that you, a non-filing spouse, or a dependent | 8b. | | Φ | 0.00 | Φ_ | | N/A | _ |
| | oc. | regularly receive Include alimony, spousal support, child support, maintenance, divorce | | | | | | | | |
| | | settlement, and property settlement. | 8c. | | \$ | 0.00 | \$ | | N/A | |
| | 8d. | Unemployment compensation | 8d | | · | 0.00 | \$ | | N/A | |
| | 8e. | Social Security | 8e. | | | 3.56 | \$ | | N/A | _ |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | e 8f. | | \$ | 0.00 | \$ | | N/A | _ |
| | 8g. | Pension or retirement income | 8g | | \$ | 0.00 | \$ | | N/A | _ |
| | 8h. | Other monthly income. Specify: | 8h | .+ | \$ | 0.00 | + \$ _ | | N/A | _ |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 1,62 | 3.56 | \$_ | | N/ | A |
| 10. | Calc | culate monthly income. Add line 7 + line 9. | 10. | \$ | 1,623.56 | + \$ | | N/A | = \$ | 1,623.56 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | , | 1 L | | | j | , |
| 11. | Inclu othe | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | depe | | . , | | • | Schedule | e <i>J</i> . +\$ | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certaines | | | | | | e. 12. | \$ | 1,623.56 |
| | | | | | | | | | Combi month | ned ly income |
| 13. | Do y | you expect an increase or decrease within the year after you file this form | ? | | | | | | | |
| | | No. | | | | | | | | |
| | | Yes Explain: | | | | | | | | |

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| Fill | in this information to ic | lentify your case: | | | | | |
|-------|--|---------------------------------------|---|---|-----------------------------|---|---|
| Deb | otor 1 Josep | oh C. Buras | | | Che | ck if this is: | |
| | otor 2 ouse, if filing) | | | | | An amended filing A supplement show 13 expenses as of | wing postpetition chapter the following date: |
| Unit | ted States Bankruptcy Co | urt for the: NORTH | HERN DISTRICT OF ILLIN | OIS | | MM / DD / YYYY | |
| Cas | se number | | | | | | |
| (If k | nown) | | | | | | |
| 0 | fficial Form 1 | 06J | | | | | |
| S | chedule J: Y | our Exper | nses | | | | 12/15 |
| info | as complete and acc ormation. If more spa mber (if known). Ans | ce is needed, atta | . If two married people ar ach another sheet to this n. | e filing together, b form. On the top of | oth are equ f any additi | ually responsible fo onal pages, write y | or supplying correct your name and case |
| | t 1: Describe You | | | | | | |
| 1. | Is this a joint case? No. Go to line 2. | • | | | | | |
| | Yes. Does Debto | r 2 live in a separ | ate household? | | | | |
| | □ No | • | | | | | |
| | ☐ Yes. Debt | or 2 must file Offic | ial Form 106J-2, <i>Expenses</i> | for Separate House | ehold of Deb | otor 2. | |
| 2. | Do you have depen | dents? ■ No | | | | | |
| | Do not list Debtor 1 a Debtor 2. | and Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | | | □ No |
| | dependents names. | | | | | | □ Yes □ No |
| | | | | | | | ☐ Yes |
| | | | | | | | □ No |
| | | | | | | | ☐ Yes ☐ No |
| | | | | | | | □ Yes |
| 3. | Do your expenses i | | l No | | | | |
| | expenses of people yourself and your d | | l Yes | | | | |
| Par | t 2: Estimate You | r Ongoing Month | ly Expenses | | | | |
| Est | imate your expenses | as of your bankr | uptcy filing date unless y y is filed. If this is a supp | | | | |
| the | | | government assistance in cluded it on Schedule I: Y | | | Your exp | enses |
| • | ŕ | | _ | | | | |
| 4. | The rental or home payments and any re | | nses for your residence. In or lot. | nclude first mortgage | e 4. : | \$ | 0.00 |
| | If not included in lin | ne 4: | | | | | |
| | 4a. Real estate ta | xes | | | 4a. | | 0.00 |
| | | eowner's, or rente | | | 4b. | | 0.00 |
| | | nance, repair, and association or con | | | 4c. 4d. | | 0.00 |
| 5. | | | our residence. such as ho | me equity loans | 5. | · | 0.00 |

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| otor 1 J | oseph C. Buras | Case number (if l | known) |
|---------------------|---|------------------------|----------|
| Utilities | : | | |
| | lectricity, heat, natural gas | 6a. \$ | 0.00 |
| | ater, sewer, garbage collection | 6b. \$ | 95.00 |
| | elephone, cell phone, Internet, satellite, and cable services | 6c. \$ | 40.00 |
| | ther Specify: Internet | 6d \$ | 50.00 |
| | able | \$ _ | 60.00 |
| | able nd housekeeping supplies | | |
| | | · _ | 600.00 |
| | re and children's education costs | 8. \$ | 0.00 |
| • | g, laundry, and dry cleaning | 9. \$ | 40.00 |
| | al care products and services | 10. \$ | 50.00 |
| | and dental expenses | 11. \$ | 0.00 |
| | ortation. Include gas, maintenance, bus or train fare. | 40 ft | 200.00 |
| | nclude car payments. | 12. \$ | |
| | inment, clubs, recreation, newspapers, magazines, and books | 13. \$ | 0.00 |
| | ble contributions and religious donations | 14. \$ | 0.00 |
| Insuran | | | |
| | nclude insurance deducted from your pay or included in lines 4 or 20. | 45 🌣 | <u>-</u> |
| | fe insurance | 15a. \$ | 35.00 |
| | ealth insurance | 15b. \$ | 0.00 |
| 15c. Ve | ehicle insurance | 15c. \$ | 107.50 |
| 15d. O | ther insurance. Specify: | 15d. \$ | 0.00 |
| | Do not include taxes deducted from your pay or included in lines 4 or 20 |). | |
| Specify: | | 16. \$ | 0.00 |
| | ent or lease payments: | | |
| 17a. Ca | ar payments for Vehicle 1 | 17a. \$ | 335.18 |
| 17b. C | ar payments for Vehicle 2 | 17b. \$ | 0.00 |
| 17c. O | ther. Specify: | 17c. \$ | 0.00 |
| 17d. O | ther. Specify: | 17d. \$ | 0.00 |
| Your pa | yments of alimony, maintenance, and support that you did not rep | ort as | |
| | ed from your pay on line 5, Schedule I, Your Income (Official Form | | 0.00 |
| | ayments you make to support others who do not live with you. | \$ | 0.00 |
| Specify: | | 19. | |
| Other re | eal property expenses not included in lines 4 or 5 of this form or or | n Schedule I: Your Inc | come. |
| | ortgages on other property | 20a. \$ | 0.00 |
| | eal estate taxes | 20b. \$ | 0.00 |
| 20c. Pi | roperty, homeowner's, or renter's insurance | 20c. \$ | 0.00 |
| | aintenance, repair, and upkeep expenses | 20d. \$ | 0.00 |
| | omeowner's association or condominium dues | 20e. \$ | 0.00 |
| | | 20e. φ 21. +\$ | |
| Other: S | specily: | Z1. + \$ | 0.00 |
| Calcula | te your monthly expenses | | |
| | d lines 4 through 21. | \$ | 1,612.68 |
| | py line 22 (monthly expenses for Debtor 2), if any, from Official Form 10 | 06J-2 \$ - | .,0.2.00 |
| | d line 22a and 22b. The result is your monthly expenses. | \$ - | 4.040.00 |
| 220. AUC | a inte 22a anu 22b. The result is your monthly expenses. | Φ - | 1,612.68 |
| Calcula | te your monthly net income. | | |
| | opy line 12 (your combined monthly income) from Schedule I. | 23a. \$ | 1,623.56 |
| | opy your monthly expenses from line 22c above. | 23b\$ | 1,612.68 |
| | -1, , , | | 1,012.00 |
| 23c. Si | ubtract your monthly expenses from your monthly income. | | |
| | he result is your <i>monthly net income</i> . | 23c. \$ | 10.88 |
| For exam modificati | expect an increase or decrease in your expenses within the year a ple, do you expect to finish paying for your car loan within the year or do you exponent to the terms of your mortgage? | | |
| No. | | | |
| Yes. | Explain here: | | |

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| Fill in this inform | nation to identify your | case: | | | |
|---------------------------------------|---|--------------------------|--------------------------|-------------------------|--|
| Debtor 1 | Joseph C. Buras | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an amended filing |
| Official Form | - | ın Individual | Debtor's So | chedules | 12/15 |
| Doolarat | ion About c | - IIIaiviaaai | DODIOI O O | Jiioaaico | 12/13 |
| obtaining money years, or both. 18 | | n connection with a bank | | | ement, concealing property, or 0, or imprisonment for up to 20 |
| Did you pay | or agree to pay some | one who is NOT an attor | ney to help you fill out | bankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. N | lame of person | | | | kruptcy Petition Preparer's Notice, , and Signature (Official Form 119) |
| | ty of perjury, I declare true and correct. | that I have read the sum | mary and schedules fil | ed with this declaratio | on and |
| X /s/ Jose | eph C. Buras | | X | | |
| Joseph | C. Buras e of Debtor 1 | | Signature o | f Debtor 2 | |

Date

Date December 7, 2017

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| Fill | in this inforn | nation to identify you | r case: | | | |
|---------------------|--------------------------------------|--|--|--|---|---|
| Deb | otor 1 | Joseph C. Buras | 3 | | | |
| | | First Name | Middle Name | Last Name | | |
| | otor 2 use if, filing) | First Name | Middle Name | Last Name | | |
| Unit | ted States Ba | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Cas (if kn | se number | | | | | ☐ Check if this is an amended filing |
| Sta Be a info | s complete a | of Financial and accurate as poss ore space is needed, | ible. If two married people attach a separate sheet to | duals Filing for B are filing together, both are this form. On the top of an | equally responsible for | |
| | | n). Answer every que Details About Your Ma | stion. arital Status and Where Yo | ı Lived Before | | |
| 1. | - | r current marital statu | | 2 21704 201010 | | |
| | _ | | | | | |
| | ☐ Married | | | | | |
| | ■ Not mar | ried | | | | |
| 2. | During the la | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No | | | | | |
| | ☐ Yes. Lis | t all of the places you | lived in the last 3 years. Do n | ot include where you live nov | ٧. | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ac | ldress: | Dates Debtor 2 lived there |
| 3. | | | | gal equivalent in a commun | | |
| State | s and territori | es meidde Anzona, Oe | illiottila, taatio, Louisiatia, te | vada, New Mexico, Fuerto N | ico, rexas, washington e | and wisconsin.) |
| | ■ No | | | | | |
| | ☐ Yes. Ma | ike sure you fill out <i>Sci</i> | hedule H: Your Codebtors (C | fficial Form 106H). | | |
| Par | Explai | n the Sources of You | ır Income | | | |
| 4. | Fill in the total If you are filing. | al amount of income yo | ou received from all jobs and | ng a business during this you all businesses, including part re together, list it only once ur | -time activities. | calendar years? |
| | | , <u></u> | 5.1/ | | D.1.1.0 | |
| | | | Debtor 1 | Crean inecrus | Debtor 2 | Cuana in a sur- |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | | | | | |

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| 5. | Include in and other | come regard public bene | dless of wheth fit payments; | ner that income is taxable. pensions; rental income; in | two previous calendar years Examples of other income are nterest; dividends; money colle at you received together, list i | e alimony; child suppected from lawsuits; | royalties; and gambling | | | |
|-----------|-----------------------------|---------------------------------------|---------------------------------|--|--|--|--|-------------|--|--|
| | List each | source and t | the gross inco | ome from each source sep | arately. Do not include income | e that you listed in lir | ne 4. | | | |
| | □ No | | | | | | | | | |
| | _ | Fill in the de | etails | | | | | | | |
| | — 103. | i iii iii uic uc | ians. | | | | | | | |
| | | | | Debtor 1 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Debtor 2 Sources of inc Describe below | | leductions | | |
| | | y 1 of curre filed for bar | nt year until nkruptcy: | Social Security | \$19,482.00 |) | | | | |
| | r last caler anuary 1 to | ndar year: December | 31, 2016) | Social Security | \$19,482.00 |) | | | | |
| Fo (Ja | r the calen anuary 1 to | dar year be December | fore that: 31, 2015) | Social Security | \$19,482.00 |) | | | | |
| | | | | | | | | | | |
| Pa | rt 3: Lis | t Certain Pa | yments You | Made Before You Filed f | or Bankruptcy | | | | | |
| 6. | Are eithe ☐ No. | Neither De | ebtor 1 nor D | 's debts primarily consul bebtor 2 has primarily co personal, family, or house | n sumer debts. Consumer de | bts are defined in 11 | U.S.C. § 101(8) as "inco | urred by an | | |
| | | During the | 90 days befo | ore you filed for bankruptcy | , did you pay any creditor a to | otal of \$6,425* or mo | ire? | | | |
| | | □ No. | | | | | | | | |
| | | ☐ Yes | paid that cr | | paid a total of \$6,425* or more nents for domestic support ob | | | | | |
| | | * Subject | | | ears after that for cases filed c | on or after the date of | of adjustment. | | | |
| | Yes. | | | r both have primarily control or you filed for bankruptcy | nsumer debts. , did you pay any creditor a to | otal of \$600 or more? | ? | | | |
| | | □ No. | Go to line 7 | | | | | | | |
| | | ■ Yes | include pay | | paid a total of \$600 or more a t obligations, such as child su | | | | | |
| | Creditor | 's Name and | d Address | Dates of pay | | Amount you still owe | Was this payment for | r | | |
| | P.O. Bo | Financial s ox 5855 tream, IL 6 | | 10/17, 11/17 12/17 | paid 7 + \$1,005.00 | \$19,000.00 | ☐ Mortgage ■ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendo | rs | | |

☐ Other__

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| 7. | Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 17 alimony. | rtners; relatives of any gen- control, or owner of 20% or | eral partners; partner r more of their voting | erships of which g securities; and | you are a general any managing a | al partner; corporations gent, including one fo |
|-----|--|--|--|---------------------------------------|----------------------------------|--|
| | No | | | | | |
| | Yes. List all payments to an insider. Insider's Name and Address | Dates of payment | Total amount | Amount you | ı Reason for | this payment |
| | maider a Name and Address | Dates of payment | paid | still owe | | uns payment |
| 3. | Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi | | ments or transfer a | any property or | n account of a d | ebt that benefited an |
| | No No | | | | | |
| | Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | | this payment litor's name |
| Par | t 4: Identify Legal Actions, Repossession | s and Foreclosures | | | | |
| | List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | | | n suits, paternit | | ŕ |
| | Case title Case number | Nature of the case | Court or agency | | Status of th | e case |
| 0. | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below ■ No. Go to line 11. □ Yes. Fill in the information below. | <i>i</i> . | rty repossessed, f | | | |
| | Creditor Name and Address | Describe the Property | | te Value of the property | | |
| | | Explain what happened | | | | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment beca No Yes. Fill in the details. | | uding a bank or fii | nancial institut | ion, set off any a | amounts from your |
| | Creditor Name and Address | Describe the action the | creditor took | | te action was | Amount |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at No Yes | | rty in the possess | | | efit of creditors, a |
| Par | t 5: List Certain Gifts and Contributions | | | | | |
| 13. | Within 2 years before you filed for bankrup | tcy, did you give any gifts | with a total value | of more than \$ | 600 per person | ? |
| | No | | | | | |
| | ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person | Describe the gifts | | | tes you gave e gifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | | | |

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| 14. | Within 2 years before you filed for bankru | ptcy, d | id you give any gifts or contribution | ıs with a total | value of more than | \$600 to any charity? | | | |
|-----|---|------------------|--|-----------------|---|---------------------------|--|--|--|
| | ■ No | | | | | | | | |
| | Yes. Fill in the details for each gift or co | ntributio | on. | | | | | | |
| | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | | Describe what you contributed | | Dates you contributed | Value | | | |
| Par | t 6: List Certain Losses | | | | | | | | |
| 15. | Within 1 year before you filed for bankrup or gambling? | tcy or | since you filed for bankruptcy, did y | ou lose anyth | ning because of thef | t, fire, other disaster | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | how the loss occurred | Include | the amount that insurance has paid. Loc claims on line 33 of Schedule A/B: | ist pending | Date of your loss | Value of property lost | | | |
| Par | | | | , reporty | | | | | |
| 16. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. | | | | | | | | |
| | ☐ No ■ Yes. Fill in the details. | | | | | | | | |
| | | | Basedetian and advantage of annual | | Date payment | A 1 1 | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | | Description and value of any propertransferred | | | Amount of payment | | | |
| | Law Office of Gregory J. Martucci 203 E. Irving Park Road Roselle, IL 60172 | | Attorney Fees + Costs | | 6/2017 - 11/2017 | \$500.00 | | | |
| 17. | Within 1 year before you filed for bankrup promised to help you deal with your credi Do not include any payment or transfer that your Robert No | itors or | to make payments to your creditors | | r transfer any prope | ty to anyone who | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Person Who Was Paid Address | | Description and value of any propertransferred | erty | Date payment or transfer was made | Amount of payment | | | |
| 18. | Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have alre No Yes. Fill in the details. | busine made a | ess or financial affairs? s security (such as the granting of a se | | | | | | |
| | Person Who Received Transfer Address | | Description and value of property transferred | | ny property or received or debts change | Date transfer was made | | | |
| | Person's relationship to you | | | | | | | | |
| | | | | | | | | | |

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Debtor 1 Joseph C. Buras

| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called <i>asset-protection devices</i> .) No | | | |
|-----|--|---|---|---|
| | Yes. Fill in the details. | | | |
| | Name of trust | Description and value of the pro | pperty transferred | Date Transfer was made |
| Pai | t 8: List of Certain Financial Accounts, Instr | ruments, Safe Deposit Boxes, and S | torage Units | |
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. | | | |
| | ■ No | | | |
| | Yes. Fill in the details. | | | |
| | | Last 4 digits of Type of account number instrument | unt or Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | |
| | ■ No □ Yes. Fill in the details. | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | | | |
| | ■ No □ Yes. Fill in the details. | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? |
| Pai | t 9: Identify Property You Hold or Control fo | or Someone Else | | |
| 23. | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. | | | |
| | ■ No □ Yes. Fill in the details. | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value |
| Pai | t 10: Give Details About Environmental Inform | mation | | |
| For | the purpose of Part 10, the following definition | s apply: | | |
| | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. | | | |
| | Site means any location, facility, or property a | s defined under any environmental | law, whether you now own, operate | or utilize it or used |

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

to own, operate, or utilize it, including disposal sites.

hazardous material, pollutant, contaminant, or similar term.

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Debtor 1 Joseph C. Buras

| 24. | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No | | | | | | | | |
|-----|--|--|---|--------|--|--------------------|--|--|--|
| | | Yes. Fill in the details. | | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | ıd | Environmental law, if you know it | Date of notice | | | |
| 25. | Hav | e you notified any governmental unit of | any release of hazardous material? | | | | | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | ıd | Environmental law, if you know it | Date of notice | | | |
| 26. | Hav | e you been a party in any judicial or adn | ninistrative proceeding under any envi | iron | mental law? Include settlements | and orders. | | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | Case Title Case Number | | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Na | ture of the case | Status of the case | | | |
| Par | t 11: | Give Details About Your Business or | Connections to Any Business | | | | | | |
| 27. | Witl | nin 4 years before you filed for bankrupt | cy, did you own a business or have ar | ny of | f the following connections to any | / business? | | | |
| | | ☐ A sole proprietor or self-employed in | n a trade, profession, or other activity, | , eith | ner full-time or part-time | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | | |
| | | ☐ A partner in a partnership | | | | | | | |
| | | ☐ An officer, director, or managing ex | ecutive of a corporation | | | | | | |
| | | ☐ An owner of at least 5% of the voting | g or equity securities of a corporation | | | | | | |
| | | No. None of the above applies. Go to F | Part 12. | | | | | | |
| | | Yes. Check all that apply above and fill | in the details below for each business | s. | | | | | |
| | | siness Name dress | Describe the nature of the business | | Employer Identification numbe | | | | |
| | | mber, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | | Do not include Social Security Dates business existed | number of fine. | | | |
| 28. | | nin 2 years before you filed for bankrupt itutions, creditors, or other parties. | cy, did you give a financial statement | to a | nyone about your business? Inclu | ude all financial | | | |
| | | No Yes. Fill in the details below. | | | | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | | | | | | | | |
| | | | | | | | | | |

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Case number (if known) Document

Debtor 1 Joseph C. Buras

| Part 1 | 2: Sign Below | | |
|-------------------|---|---|--|
| are tru with a | e and correct. I understand that making | inancial Affairs and any attachments, and I declare under penalty of perjury that the answers a false statement, concealing property, or obtaining money or property by fraud in connection \$250,000, or imprisonment for up to 20 years, or both. | |
| /s/ Jo | seph C. Buras | | |
| Jose | ph C. Buras | Signature of Debtor 2 | |
| Signa | ture of Debtor 1 | | |
| Date | December 7, 2017 | | |
| Did yo | u attach additional pages to <i>Your Staten</i> | nent of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? | |
| ■ No | | | |
| ☐ Yes | | | |
| Did yo | u pay or agree to pay someone who is n | ot an attorney to help you fill out bankruptcy forms? | |
| ■ No | | | |
| ☐ Yes | . Name of Person Attach the Bank | uptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | |

connection

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| Fill in this informatio | on to identify your c | ase: | | | | | |
|-------------------------------------|-----------------------|------------------------|---------------|--|--------------------|--|-------|
| | oseph C. Buras | ueo: | | | | | |
| Fi | rst Name | Middle Name | | Last Name | | | |
| Debtor 2 (Spouse if, filing) Fit | rst Name | Middle Name | | Last Name | | | |
| United States Bankrup | otcy Court for the: | NORTHERN DISTR | RICT OF ILLII | NOIS | | | |
| Case number | • | | | | | | |
| (if known) | | | | | | ☐ Check if this is an | 1 |
| | | | | | | amended filing | |
| ~ | | | | | | | |
| Official Form | | | | | | _ | |
| Statement of | of Intention | <u>n for Indivi</u> | duals | Filing Under | <u>Chapter</u> | · 7 | 2/15 |
| If you are an individua | al filing under chap | ter 7. vou must fill o | out this form | ı if: | | | |
| ■ creditors have clai | | - | | | | | |
| you have leased po | | | | | | | |
| | s earlier, unless the | | | | | for the meeting of credito creditors and lessors you | |
| If two married people sign and da | | in a joint case, both | n are equally | responsible for supply | ying correct info | ormation. Both debtors m | ust |
| | accurate as possibl | | needed, atta | ch a separate sheet to | this form. On th | e top of any additional pa | ages, |
| Part 1: List Your C | Creditors Who Have | Secured Claims | | | | | |
| | | | Craditars W | ho Havo Claims Socure | ad by Proporty (| Official Form 106D), fill in | tho |
| information below. | | | | | | , , , , , , , , , , , , , , , , , , , | |
| Identify the creditor | r and the property th | at is collateral | secures a | u intend to do with the lebt? | property that | Did you claim the pro as exempt on Schedu | |
| | | | | | | | |
| Creditor's Toyot | ta Financial Servi | ces | ☐ Surrende | er the property. | | □ No | |
| name: | | | _ | ne property and redeem | | ■ Yes | |
| • | 15 Toyota RAV 4 | 7500 miles | | e property and enter into nation Agreement. | оа | ■ Yes | |
| property | eased Vehicle | | | e property and [explain] | : | | |
| securing debt: | | | | | | | |
| | Inexpired Personal | | | | | | |
| in the information bel | low. Do not list real | estate leases. Une | xpired lease | | ill in effect; the | Leases (Official Form 100 lease period has not yet of the contract of the cont | |
| Describe your unexp | pired personal prop | erty leases | | | 1 | Will the lease be assumed | ነ? |
| Lessor's name: | GC Booky & De | evelopment, LLC | | | , | 7 No. | |
| Lessoi s name. | GC Realty & De | evelopilient, LLC | | | I | □ No | |
| | | | | | ı | Yes | |
| Description of leased Property: | Residential lea | se for 685 Foxdal | e Ct., Rose | elle, IL 60172 | | | |
| Lessor's name: | Toyete Finer - | al Carviaca | | | | □ Ni | |
| LESSUI S HAITIE. | Toyota Financi | ai Services | | | l | □ No | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Del | otor 1 Joseph C | . Buras | Case number (if known) | |
|------|-----------------------------|---------------------------|---|---|
| | | | ■ Yes | |
| | scription of leased operty: | 2015 Toyota RAV 4 lease t | ough 7/2018 | |
| Par | rt 3: Sign Below | | | _ |
| prop | perty that is subjec | et to an unexpired lease. | my intention about any property of my estate that secures a debt and any personal | |
| X | /s/ Joseph C. B | | X | _ |
| | Signature of Debte | | 3. g | |
| | Date Decem | nber 7, 2017 | Date | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-36491 Doc 1 Filed 12/08/17 Entered 12/08/17 13:11:41 Desc Main Document Page 45 of 48

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In r | e Joseph C. Bı | ıras | | | | | Case No. | | |
|------|---|------------------------------------|---|---|---|--|--------------------------------------|------------------------|---------------------|
| | | | | | Debtor(s) | | Chapter | 7 | |
| | DI | SCL | OSURE OF | COMPENSA | TION OF AT | TORNEY | FOR DE | CBTOR(S) | |
| 1. | Pursuant to 11 U .S compensation paid be rendered on behavior | to me | within one year be | efore the filing of th | e petition in bankru | uptcy, or agreed | l to be paid | to me, for service | |
| | For legal servi | ces, I l | have agreed to acc | cept | | \$ | | 500.00 | |
| | Prior to the fil | ng of | this statement I ha | we received | | \$ | | 500.00 | |
| | Balance Due | | | | | \$ | | 0.00 | |
| 2. | The source of the c | ompen | sation paid to me | was: | | | | | |
| | Debtor | | Other (specify): | : | | | | | |
| 3. | The source of comp | ensati | on to be paid to m | ne is: | | | | | |
| | Debtor | | Other (specify): | : | | | | | |
| 4. | ■ I have not agree | ed to s | hare the above-dis | sclosed compensation | on with any other po | erson unless the | ey are meml | pers and associate | tes of my law firm. |
| | ☐ I have agreed to copy of the agr | share eemen | the above-disclos t, together with a | sed compensation w list of the names of | ith a person or pers the people sharing | sons who are no in the compens | ot members ation is atta | or associates of ched. | my law firm. A |
| 5. | In return for the ab | ove-di | sclosed fee, I have | e agreed to render le | egal service for all a | aspects of the b | ankruptcy c | ase, including: | |
| | b. Preparation and c. Representation d. [Other provision Negotiat reaffirma | filing of the os as n ons v tion a | of any petition, so debtor at the meet eeded] with secured cre agreements and | on, and rendering acchedules, statement ing of creditors and editors to reduced applications as liens on household. | of affairs and plan confirmation heari to market value needed; prepara | which may be ring, and any adje; exemption | equired; ourned hear planning; | rings thereof; | and filling of |
| 6. | | ntatio | | s in any discharg | | | avoidance | es, relief from | stay actions or |
| | | | | CEI | RTIFICATION | | | | |
| this | I certify that the for bankruptcy proceed | | g is a complete sta | tement of any agree | ement or arrangeme | ent for payment | to me for re | epresentation of | the debtor(s) in |
| I | December 7, 201 | 7 | | | /s/ Gregory . | J. Martucci | | | |
| 1 | Date | | | | | Martucci 6185 | 842 | | |
| | | | | | | ποrney of Gregory J. | Martucci. | P.C. | |
| | | | | | 203 E. Irving | Park Rd. | · · · | - | |
| | | | | | Roselle, IL 6 | 50172 | | | |
| | | | | | Name of law fi | ĩrm | | | |

United States Bankruptcy Court Northern District of Illinois

| In re | Joseph C. Buras | | Case No. | |
|-------|--|---|--------------------------------|---------------|
| | | Debtor(s) | Chapter 7 | |
| | VE | CRIFICATION OF CREDITOR M | ATRIX | |
| | | Number of | Creditors: | 17 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credit | ors is true and correct to the | ne best of my |
| Date: | December 7, 2017 | /s/ Joseph C. Buras Joseph C. Buras Signature of Debtor | | |

American Express P.O. Box 0001 Los Angeles, CA 90096

Barclays Bank/Juniper P.O. Box 8803 Wilmington, DE 19899

Bloomingdale Fire Protection District No. 1 P.O. Box 457 Wheeling, IL 60090

BMO Harris Bank P.O. Box 94304 Palatine, IL 60094

Capital One Bank P.O. Box 30281 Salt Lake City, UT 84130

Credit One Bank P.O. Box 98873 Las Vegas, NV 89193

Dependon Collection Services, Inc. P.O. Box 4983 Oak Brook, IL 60522

Dr. Eniokova In Patient Consult of Illinois P.O. Box 844918 Los Angeles, CA 90084

Dr. Hameduddin Northwest Suburban Medical 3150 W. Higgins Rd., Ste. 130 Hoffman Estates, IL 60169

Dr. Komonick Center for Sports Orthopaedic 1585 Barrington Rd., Ste. 101 Hoffman Estates, IL 60169 Dr. Tajuddin Northwest Oncology & Hematology 3701 Algonquin Rd., Ste. 900 Rolling Meadows, IL 60008

Figis P.O. Box 77001 Madison, WI 53707

Lending Club Corporation 12 Stevenson, Ste. 300 San Francisco, CA 94105

NCI, Inc. 3601 Algonquin Road, Ste. 232 Rolling Meadows, IL 60008

Radiological Consultants of Woodsto 9410 Compubill Drive Orland Park, IL 60462

Suburban Radiologists S.C. 1446 Momentum Place Chicago, IL 60689

Toyota Financial Services P.O. Box 5855 Carol Stream, IL 60197